DATE: September 17, 2008 TO: All Interested Parties

FROM: R. Michael McCabe, Shahram Orandi

SUBJECT: Upcoming Mobile ID Work Group Meeting

During the previous Mobile ID workshop held June 4–5th 2008, the May 5th draft of the Mobile ID Device Best Practice Recommendation (BPR) was discussed and numerous updates, corrections, and modifications were proposed and approved for inclusion in an updated document. The September 16, 2008 draft of this Mobile ID Device Best Practice Recommendation is now available for review and comment. The document and its required comment form can be downloaded from http://fingerprint.nist.gov/mobileid. After reviewing the document record all of your comments and questions on the form provided and send to mobileid@nist.gov

The September 16th draft and all comments and questions received will be discussed and resolutions formulated during the next Mobile ID workshop to be held:

When: Tuesday-Wednesday, October 28-29th, 2008

Time: 9:00 am-5 pm

Where: IDTP Conference Center

12 South Summit Ave. Gaithersburg, MD 20877

(301) 990-9061

Any additional issues or aspects of Mobile ID that you would like to have discussed during the October meeting should be forwarded to mobileid@nist.gov as soon as possible so that these topics can be placed on the agenda.

Directions to IDTP and other visitor information can be found at:

http://www.idtp.com/mobileid

Cost: There is no fee for this workshop. Pre-registration is **mandatory** and closes on Tuesday October 21, 2008. After this date, admission to the workshop may not be possible. Space is limited, so register early.

If you are not currently a member of the Mobile ID ad hoc group but would like to join or need other information please contact mobileid@nist.gov

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http://www.idtp.com http://fingerprint.nist.gov/mobileid

301-865-9371 301-975-3261

(registration form follows on the next page)

Registration:To pre-register for this workshop please complete the following and email to mobileid@nist.gov

First Name:	Last Name:	
Country of Citizenship:		
Title:		
Company:		
Address 1:		
Address 2:		
City:		Zip Code:
Phone:	Ext:	
Email:		